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|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------|-----------------------------------------------------|-------------------------|
| <b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>                                                                                                                                                                                               |                                  | <b>Docket Number (Optional)</b><br>R2180.0104/P0104 |                         |
| <b>Application Number</b> 09/800,586-Conf. #1448                                                                                                                                                                                                          |                                  | <b>Filed</b>                                        | March 8, 2001           |
| <b>For</b> OPTICAL APPARATUS FOR RECORDING/REPRODUCING AND READING/REPRODUCING DATA ON AN OPTICAL RECORDING MEDIUM, AND METHOD FOR USING SAME                                                                                                             |                                  |                                                     |                         |
| <b>Art Unit</b> 2652                                                                                                                                                                                                                                      |                                  | <b>Examiner</b> M. V. Battaglia                     |                         |
| This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.<br>The requested extension and fee are as follows (check time period desired and enter the appropriate fee below): |                                  |                                                     |                         |
|                                                                                                                                                                                                                                                           |                                  | <u>Fee</u>                                          | <u>Small Entity Fee</u> |
| <input type="checkbox"/>                                                                                                                                                                                                                                  | One month (37 CFR 1.17(a)(1))    | \$110.00                                            | \$55.00 \$              |
| <input checked="" type="checkbox"/>                                                                                                                                                                                                                       | Two months (37 CFR 1.17(a)(2))   | \$430.00                                            | \$215.00 \$ 430.00      |
| <input type="checkbox"/>                                                                                                                                                                                                                                  | Three months (37 CFR 1.17(a)(3)) | \$980.00                                            | \$490.00 \$             |
| <input type="checkbox"/>                                                                                                                                                                                                                                  | Four months (37 CFR 1.17(a)(4))  | \$1,530.00                                          | \$765.00 \$             |
| <input type="checkbox"/>                                                                                                                                                                                                                                  | Five months (37 CFR 1.17(a)(5))  | \$2,080.00                                          | \$1,040.00 \$           |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.                                                                                                                                                                           |                                  |                                                     |                         |
| <input type="checkbox"/> A check in the amount of the fee is enclosed.                                                                                                                                                                                    |                                  |                                                     |                         |
| <input checked="" type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.                                                                                                                                                                    |                                  |                                                     |                         |
| <input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.                                                                                                                                |                                  |                                                     |                         |
| <input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 04-1073. I have enclosed a duplicate copy of this sheet.                             |                                  |                                                     |                         |
| I am the <input type="checkbox"/> applicant/inventor.                                                                                                                                                                                                     |                                  |                                                     |                         |
| <input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71.<br>Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).                                                                                                     |                                  |                                                     |                         |
| <input type="checkbox"/> attorney or agent of record. Registration Number _____                                                                                                                                                                           |                                  |                                                     |                         |
| <input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34(a).<br>Registration number if acting under 37 CFR 1.34(a) 28,371                                                                                                                  |                                  |                                                     |                         |
| _____<br>Signature                                                                                                                                                                                                                                        |                                  | October 6, 2004<br>Date                             |                         |
| Thomas J. D'Amico<br>Typed or printed name                                                                                                                                                                                                                |                                  | (202) 828-2232<br>Telephone Number                  |                         |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below                                                      |                                  |                                                     |                         |
| <input type="checkbox"/> Total of 1 forms are submitted.                                                                                                                                                                                                  |                                  |                                                     |                         |

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